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Bib Data Sheet

CONFIRMATION NO. 9609

SERIAL NUMBER 10/682,418	FILING OR 371(c) DATE 10/10/2003 RULE	CLASS 463	GROUP ART UNIT 3713	ATTORNEY DOCKET NO. 05905.0174
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** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** JAPAN 2002-299521 10/11/2002				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/15/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY JAPAN	SHEETS DRAWING 3	TOTAL CLAIMS 6
INDEPENDENT CLAIMS 1				
ADDRESS 22852				
TITLE Computer program product				
FILING FEE RECEIVED 1190	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	